Department of Labor and Industries Division of Occupational Safety and Health www.lni.wa.gov/safety - 1-800-423-7233



SAFETY MEETING MINUTES

The record for this safety meeting must be kept for one year. Employer				Page 1 of 2
Worksite location				
Meeting date:		Me	eeting start time: Meeting end time	
Attendance				
(M)anagement (E)mploye	e			M E
Examples:	John Smith Mary Brown			
		M E	M	<u>M</u> E
		M E		
		M E	M E	<u>M</u> E
		- <u>M</u>		<u>M</u> E
Agenda:				
Review minutes of ou	r previous meetir	ng dated	/ / for corrections/approval.	
Discuss hazards, conc	eerns, self-inspect	ions, oth	ner inspections, etc., since our last meeting.	

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SAFETY MEETING MINUTES

The record for this safety meeting must be kept for one year. Page 2 of 2 Review accident/near miss reports to determine if causes were identified and corrected Meeting date: Meeting start time: Meeting end time: Suggested updates to our Accident Prevention Program Other Due: To Do List: Assigned to: Minutes written by Meeting leader (signature) Date next meeting Start time Location Additional attendance, members absent, guests (from front) or other notes: